

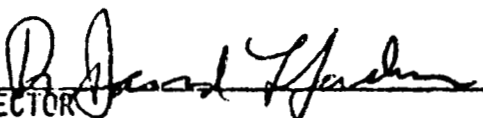
ADDENDUM TO AGREEMENT BETWEEN  
STATE OF OHIO, DEPARTMENT OF HEALTH  
DIVISION OF MATERNAL AND CHILD HEALTH  
AND  
STATE OF OHIO, DEPARTMENT OF PUBLIC WELFARE  
DIVISION OF MEDICAL ASSISTANCE

The Department of Public Welfare and the Department of Health agree to the following:

1. The current agreement between the two parties for the provision of medical services to individuals in the Crippled Children's program (Title V) is hereby extended until September 30, 1983, in order to permit review of each department's responsibilities.
2. It is the intent of the parties that the provisions of the current agreement remain in full force and effect during this extended period.
3. The effective date of this addendum is October 1, 1982.
4. Any and all federal or state legislation enacted on or after December 31, 1981, affecting care and services under the Medicaid program to Title V children are incorporated into this agreement.

  
\_\_\_\_\_  
DIRECTOR  
OHIO DEPARTMENT OF PUBLIC WELFARE

6/20/82  
\_\_\_\_\_  
DATE

  
\_\_\_\_\_  
DIRECTOR  
OHIO DEPARTMENT OF HEALTH

8/10/83  
\_\_\_\_\_  
DATE

NO. 83-39 Rec'd 12/3/83  
Approved 12/12/83  
and ☐ 7/1/83  
Date \_\_\_\_\_  
Supervisor  
NAME \_\_\_\_\_

77-2

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MEMORANDUM OF AGREEMENT  
BY AND BETWEEN  
THE STATE OF OHIO, DEPARTMENT OF HEALTH  
and  
THE STATE OF OHIO, DEPARTMENT OF PUBLIC WELFARE

Whereas, the purpose of this agreement between the State of Ohio, Department of Public Welfare, hereinafter referred to as Welfare, and State of Ohio, Department of Health, hereinafter referred to as Health, is to insure that there will be maximum utilization of health services for the entire family, including crippled children services and services for individuals under 21 in Ohio; and

Whereas these services are designed to:

1. Reduce infant and maternal mortality and morbidity, and promote the health of parents and children, and
2. Locate, offer ongoing treatment, treat and rehabilitate individuals who are handicapped or who are suffering from conditions leading to handicapping. (A handicapped child is one who has any disease or condition which interferes with his normal growth and development); and
3. To reduce through early preventive measures the number of children with handicapping conditions, starting as early as the prenatal period.

Whereas, it is the spirit and intent of Welfare's Medical Assistance

St. Ohio Tr. 3/14/22 Incorp. 5/5/22 Effective 3/1/22

77-2

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Program to provide each recipient of public assistance under the federal categories, therapeutic and remedial services and supplies which are essential to attain the optimum level of well being for the individual and the family group; and

Whereas, Welfare's EPSDT program offers each recipient under 21 health services leading to the early detection of diseases including handicapping conditions, diagnosis and treatment, with emphasis on quality of care to improve their health and reduce future dependency; and

Whereas, Health emphasizes all possible services to mother and children to promote health, early identification, diagnosis and treatment of children and parents suffering from disease or disorders in order to improve and maintain good health, thru the provision of quality of care by providers of health services to recipients of medical assistance;

Now therefore Health and Welfare agree to the following covenants:

1. Health and Welfare agree:

- A. The resources of each agency shall be used to promote the health of the family group including prenatal patients and individuals under 21 in the State of Ohio who are on medical assistance.

St. Ohio Tr. 3/14/77 Incorp. 5/5/77 Effective 3/1/77

77-2

OFFICIAL

- B. The two agencies shall coordinate the services under their respective state plans, and the referral of such medical services available to children under Title V and Title XIX.
- C. The medical plans for recipients of care shall be closely coordinated between the two agencies to ensure the best single plan of treatment for each recipient and to alleviate duplication of services and payments.
- D. The Director of Health and the Director of Welfare shall each designate one person to serve as liaison between the two agencies. In addition, each department shall appoint a team composed of personnel from their respective agencies which shall meet on a bi-monthly basis or as needed. Such meetings to be convened by the Chief of the Division of Medical Assistance or his designate. The purpose of such meetings will be to evaluate and discuss the policies and cooperative efforts involved in providing care to recipients of medical assistance under the terms of this agreement further, said teams shall review this agreement and implement needed changes consistent with the state plans and other agreements of both agencies. Both agencies will coordinate

St. Ohio 3/14/77 5/5/77 3/1/77

77-2

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future goals and introduce changes to state plans from both agencies for the benefit of recipients. In part this means to work jointly to assure quality services are provided; to develop grant proposals together, which would expand services to the target population; to design a uniform mechanism for crippled childrens referrals on the local level.

- E. Confidentiality of records shall be maintained. Protection of the applicant, recipients and former recipients Rights to Privacy shall be maintained as covered in the ODPW Public Assistance Manual, Section 201.1 and in the ODH Sanitary Code, Volume 2, HE 1-03.
- F. Reimbursement will initially be made through Welfare's Medicaid Program if the recipient is classified as a Medicaid eligible recipient exclusively, and reimbursement will initially be made through Health's "Title V Program" if the recipient of care is classified as an eligible recipient under that program exclusively; but if the recipient can qualify for coverage under both Health and Welfare's reimbursement program, then Welfare's Medicaid Program shall be the primary source of reimbursement for covered services to be provided.

*Ohio* 3/14/77 5/5/77 3/1/77

77-2

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G. Health will send bills over to Welfare and Welfare will indicate whether payment occurred.

II. In consideration of the promises and covenants made by Health herein, Welfare shall:

- A. Refer all children including children of families on ADC, suspected or known to be handicapped or suffering from any disease or condition which may interfere with his normal growth or development, to Health for definitive diagnosis, treatment, and medical case management. Refer all children for potentially handicapping conditions not covered by the State Title XIX Plan.
- B. Provide Health with invoices and bills which are to be paid by Health on a timely basis.
- C. Utilize those medical resources provided by Health or created by grants from Health with Title V and X grants, and Welfare shall (provide payment or reimbursement to Health or its grantees in accordance with a mutually agreed upon schedule of fees). This would not cover services for which others are not billed.

St. Ohio Tr. 3/14/17 Incorp. 5/5/17 Effective 3/1/17

77-2

OFFICIAL

- D. Provide social services as needed for all handicapped children that are on Title XIX and Title XX.
- E. Provide Health with current listings and files on a timely basis as follows:
  - 1. Title XIX and Medicaid names and case numbers for all recipients including "IDF" and "Tart" listings on microfiche.
  - 2. Title XIX provider names and numbers, Title XIX reference files including ICDA codes, fee payment files and procedure codes. This includes a process for exchange of information for updating the files as needed for Title V services.
  - 3. Hospital Reimbursement Percentage Rates as established by Title XIX, Bureau of Fiscal Review for paying hospital invoices and establishing reasonable costs.

III. In consideration of the promises of Welfare herein, Health shall:

- A. Require its Title V and X agencies to provide services to all Title XIX children and patients who are eligible.
- B. Continue to provide services for those Title XIX handicapped or potentially handicapped individuals who have lost their eligibility.

St. Ohio Tr. 3/4/77 Incorp. 5/5/77 Effective 3/1/77

77-2

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- C. Provide medical and paramedical personnel as needed within the limitations of available staff to serve as consultants and members of advisory board and task forces to aid in the planning, recruiting of providers, implementation and evaluation of the EPSDT program.
- D. Provide Welfare each local Health Department, local Welfare Department, and Children Services Boards with a list of medical specialists approved by Health. Encourage that the 165 county and city Health departments cooperate and coordinate with the 88 county Welfare departments to promote adequate health resources and services, especially in those areas where such services do not presently exist.
- E. Health will monitor its grantees, in accordance with standards and procedures in the Maternal and Child Health State Plan, and shall provide to Welfare, the names, addresses and services provided by its grantees to Welfare. Further Health shall notify Welfare immediately of any grantee's substantial failure to meet standards contained in the Maternal and Child Health State Plan.
- F. Provide listings as required to Title XIX regarding payment information for ADC recipients for checking and updating their payment files.

39. Ohio 3/14/77 5/5/77 3/1/77



77-2

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IV. This agreement shall be in effect for a period beginning  
January 1,, 1977 through December 31,, 1977.

V. This agreement may be terminated by either party upon thirty (30)  
days written notice to the other party or modification to the  
contract may be made with the consent of both departments.

STATE OF OHIO  
DEPARTMENT OF HEALTH

STATE OF OHIO  
DEPARTMENT OF PUBLIC WELFARE

By: John H. Ackerman  
John H. Ackerman, M.D., M.P.H.  
Director

Date: Feb. 8, 1977

By: Kwegyir Aggrey  
Kwegyir Aggrey  
Director of Public Welfare

Date: Jan. 27, 1977

KA:plk  
11/18/76

St. Ohio 3/14/77 5/5/77 3/1/77